

Lamont Hunter
PCT International Division
(703) 305-6336

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/089112	FILING DATE		
						APPLICANT(S)			
CLAIMS									
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						51			
2						52			
3						53			
4						54			
5		3				55			
6	(1)					56			
7	(1)					57			
8						58			
9						59			
10						60			
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12						62			
13						63			
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41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.						T. TOTAL IND.			
TOTAL DEP.						TOTAL DEP.			
TOTAL CLAIMS						TOTAL CLAIMS			